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		, agoo	This Submission						
ENCLOSURES (Check all that apply)									
	Fee Trans	smittal Fo	orm		Drawing(s)	. <del>.</del>		After	Allowance Communication to TC
	Fee Attached			Licensing-related Papers	3			al Communication to Board peals and Interferences	
	Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement		Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD		nce Address	Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  Froprietary Information  Status Letter Other Enclosure(s) (please Identify below):  Copy of Brochure cited in IDS  Return Receipt Postcard			
	Certified Copy of Priority Document(s)  Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53			Rem	arks				
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT									
Firm Name Law Office of Mark Brown									
	Signature Mark Brown								
Printed	Printed name Mark Brown								
Date	Date 7/27/0 G		Reg. No.		30,361				
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Signature Wark KNOWN									
Typed or printed name Mark Brown						Date	7/27/OCO)		

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Substitute for form 1449/PTO				Complete if Known			
Cabolita				Application Number	10/606,086		
INF	ORMATION	I DIS	CLOSURE	Filing Date	06/25/2003		
STA	STATEMENT BY APPLICANT			First Named Inventor	Jacob M. Dubin		
(Use as many sheets as necessary)			accessed.	Art Unit	2153		
			ecessary)	Examiner Name			
Sheet	1	of	1	Attorney Docket Number	3253		

		NON PATENT LITERATURE DOCUMENTS		
Examiner Initials*				
		TICKET SOLUTIONS, INC., sales brochure		

Examiner	Date	
Signature	 Considered	

<sup>\*</sup>EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Applicant's unique citation designation number (optional). 2 Applicant is to place a check mark here if English language Translation is attached.

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